

2010-2012
HIV Prevention Education Program
Grant Application
For
Improving Student Outcomes Through Skills-Based
Comprehensive Health Education

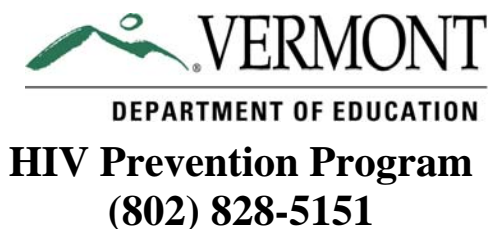


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Overview

According to the Centers for Disease Control and Prevention, “Today’s state-of-the-art health education curricula reflect the growing body of research that emphasizes teaching functional health information (essential concepts); shaping personal values that support healthy behaviors; shaping group norms that value a healthy lifestyle; and developing the essential health skills necessary to adopt, practice, and maintain health-enhancing behaviors. Less effective curricula often overemphasize teaching scientific facts and increasing student knowledge.”

The emphasis on skills-based health education has been the movement in health education for a long time; however, despite years of effort, few school districts or supervisory unions have been successful in implementing district-wide comprehensive curriculum, instruction and assessment. The purpose of this grant funding is to improve sexual health literacy through a comprehensive health education curriculum driven by state and national skill standards. Therefore, this grant opportunity is designed to provide intensive support to assist LEAs in a comprehensive effort to design and implement a preK-12 skills-based comprehensive health education curriculum.

Goals of this Grant

The goals of this grant are for schools to:

- Improve student health literacy through improved health instruction by aligning curriculum, instruction, and assessment
- Develop an LEA-wide assessment system in health education

Eligibility

Funding is available to supervisory unions and school districts (heretofore referred to as local educational agency, or LEA) that demonstrate higher than statewide average rates of risk behaviors and incidents that are known to be markers of sexual health risk, including, but not limited to: sexual risk behaviors, teen pregnancy rates, teen sexually-transmitted disease (STD) rates.

Grant Program requirements

Prior to applying, all grantees must:

- have an existing school health advisory council or school health action committee (may go by another name) to provide review and guidance for curriculum development activities.
- have an established team for the purposes of implementation of this grant that includes a representative from each school in the supervisory union/ school district. (Note: these two teams may be the same or have overlapping members.)
- have identified community resources and/or partners.

During the program period, all grantees must:

- conduct an LEA-wide curriculum analysis using the Health Education Curriculum analysis Tool (HECAT) designed by the Centers for Disease Control and Prevention (CDC). For more information see: <http://cdc.gov/healthyyouth/hecat/index.htm>
- participate in the SCASS-HEAP web-based assessment system during the project period (see Appendix E).
- host at least one site visit by the Vermont Department of Education HIV prevention and health education programs to observe implementation of grant activities.

Timeline

The grant period will begin in August of 2010 and will end on February, 29, 2012. Continuation applications (short form) will be required to secure second year of funding from March 1, 2011 through February 29, 2012.

| | |
|--------------------------------|------------------------------------|
| Application Release: | April 1, 2010 |
| Submission Deadline: | June 1, 2010 |
| Award Announcements: | June 15, 2010 |
| Project implementation Period: | August 1, 2010 – February 29, 2012 |
| Funding Period 1 | August 1, 2010 – February 28, 2011 |
| Funding period 2 | March 1, 2011 – February 29, 2012 |

Available Funding

Each selected LEA will receive up to \$8,000 for each of two grant years for a total of up to \$16,000 for the purpose of improving LEA-wide skills-based comprehensive health education through curriculum development and instructional activities. This funding may be used for related grant program activities, materials, transportation, substitute teacher fees (related to grant program activities), classroom technologies, approved curriculum purchases, and professional development activities. **Funding shall not be used for salaries.** These are competitive funds.

Funding for this grant is supported by Cooperative Agreement DP08-801 from the Centers for Disease Control and prevention (CDC) for HIV prevention education. The content of grant activities are solely the responsibility of the Vermont Department of Education and do not necessarily represent the official view of the CDC.

Reporting Requirements

Selected LEAs will be required to submit an end of year program and financial report (template will be provided) due at the end of each funding year: February 28, 2011 and February 29, 2012. In addition, to secure a second year of funding, each selected LEA will be required to submit a continuation application (short form which will be provided) by February 28, 2011.

Program Support

Technical assistance will be available at no additional cost to selected LEAs for the duration of the grant cycle. Program staff available for technical assistance include:

| | |
|--|--|
| Kate O'Neill | Donna McAllister |
| HIV Prevention Program Coordinator | Health Education Consultant |
| Vermont Department of Education | Vermont Department of Education |
| 120 State Street | 120 State Street |
| Montpelier, VT 05620 | Montpelier, VT 05620 |
| kathryn.oneill@state.vt.us | donna.mcallister@state.vt.us |
| 802-828-5151 | 802-828-1636 |

Technical assistance may include, but not be limited to:

- Regional trainings
- On-site consultation during site visits and as requested
- Additional technical assistance as requested

Application Questions

If you have questions about this application process, contact:

Kate O'Neill, HIV Prevention Program Coordinator at kathryn.oneill@state.vt.us or 802-828-5151

Application Deadline

Application with original signature and six copies must be received by **4:30 pm, June 1, 2010**, at the following address:

Kathryn C. O'Neill
HIV Prevention Coordinator
Vermont Department of Education
120 State Street
Montpelier, VT 05620-2501

Faxed or e-mailed copies will NOT be accepted.

Selection Criteria

Applications will be reviewed by a grant review committee and will be scored based on the following:

- | | |
|---|-----------|
| ▪ Application completed in its entirety including all required signatures | 10 points |
| ▪ Need | 10 points |
| ▪ Readiness | 10 points |
| ▪ Collaboration and coordination | 10 points |
| ▪ Program implementation and timeline | 30 points |
| ▪ Overcoming barriers | 20 points |
| ▪ Proposed program budget | 10 points |

Application Deadline:

4:30 p.m. June 1, 2010

Mailing Address:

Kathryn C. O'Neill
HIV Prevention Coordinator
Vermont Department of Education
120 State Street
Montpelier, VT 05620-2501

Grant Application

HIV Prevention Education Program 2010-2012



DEPARTMENT OF EDUCATION
HIV Prevention Program
120 State Street
Montpelier, VT 05620-2501
(802) 828-5151

Cover Page

Name of School District / Supervisory Union:

Total Amount Applying for in
first year 2010-2011:
\$ _____

Lead Grantee Name:

School Address:

Phone Number:

Preferred e-mail:

Pledge of Support:

I certify that, to the best of my knowledge and belief, this application is accurate and complete. I agree to support the activities conducted for which this funding is intended, including program requirements, objectives, actions and budget items as detailed in the attached application.

Curriculum Coordinator's name

signature

Superintendent's name

signature

Team Page

Our school district/supervisory union has an existing school health advisory/action committee (may go by a different name) that includes as part of its purpose to guide the development of policies and/or coordinate activities related to school health (including health education).

Yes ☐ No ☐

There is a designated staff person from each school in the supervisory union / school district who represents that school for the purpose of implementing this grant.

Yes ☐ No ☐

List representative from each school:

| Name | Title | School |
|------|-------|--------|
| | | |
| | | |
| | | |
| | | |
| | | |
| | | |
| | | |
| | | |
| | | |

Narrative Section

Not to exceed four pages using 12-point font and 1-inch margins.

Be sure to address all program requirements.

Need (10 points)

1. What is the data in your local areas telling you about the need for improved skills-based sexuality education as part of an overall comprehensive health education curriculum?
2. Specify data and sources used.

Readiness (10 points)

1. Demonstrate/describe the degree to which you believe you will be successful in developing and implementing skills-based health education because of the policies, resources, structures and other inputs you have in place.
2. Describe the degree to which your team has engaged in health education improvement activities.
3. Describe SU/district supports that are in place to help guide the process of curriculum development.

Collaboration and Coordination (10 points)

1. Describe how you plan to coordinate curriculum development work throughout your SU/district.
2. Describe relationships with community partners and/or other resources with which you have partners and/or plan to partner.
3. Describe the systemic nature of existing partnerships (i.e.: if you left your position, the existing partnerships would continue).

Program Implementation and Timeline (30 points)

1. Identify your objectives and describe how you intend to implement activities to reach your objectives.
 - a. Objectives should be SMART (see appendix for definitions).
 - b. Be sure to address grant program requirements in your objectives
 - c. Objectives should be written to encompass the full two-year grant period of August 1, 2010 through February 29, 2012.

Overcoming Barriers (20 points)

1. Identify the potential barriers you may experience that could limit or prevent success with meeting your objectives for this grant.
2. Describe how you plan to overcome these barriers. Provide specific strategies for every barrier listed.

Proposed Budget Template for Year One only (10 points)

| Sample Categories* | Description of Expense | Cost |
|--|---|-------------|
| Program Activities | | |
| Travel | | |
| Professional Development | | |
| Equipment/Technology | | |
| Curriculum**/Resources | | |
| Stipends/Sub Fees | | |
| Use of SCASS ~ HEAP Web-Based Assessment System*** | Conduct student assessments using web-based assessment system | \$500.00 |
| Other | | |
| Total | | |

*It is fully recognized that your team may not have expenses in each of the sample categories. You may add, remove or change any category to fit the activities you propose in this grant application.

** Please note that only curriculum and resources that have been approved by the Vermont Statewide HIV Materials Review Panel can be purchased using these funds. This is a limitation of the Cooperative Agreement from the Centers for Disease Control and prevention (CDC). Grantees will be provided with more details. To view currently approved materials, visit the Vermont Department of Education Health Education Resource Center materials list by clicking [here](#).

*** Since a requirement of this grant is that LEAs will conduct assessments using the SCASS~HEAP web-based assessment system during the project period, estimated costs (approximately \$500.00 per year) are provided for your convenience.

CHECKLIST
(for optional use)

Have you:

- ☐ Completed the cover page?
- ☐ Collected required signatures?
- ☐ Answered the two questions under Team Page?
- ☐ Listed the staff person(s) from each school in your SU/district who will represent that school for the purposes of implementing proposed grant activities?
- ☐ Completed the narrative section in its entirety, responding to all questions?
- ☐ Addressed all program requirements in your narrative?
- ☐ Written your objective using SMART language?
- ☐ Completed a budget page?

**2010-2012 HIV Prevention Education Program
Grant Application for Improving Student Outcomes Through Skills-Based Comprehensive
Health Education**

Scoring Criteria

| Category | Reader's Score | | |
|--|----------------|-----|------|
| | Low | Med | High |
| Application: 10 points → Received by Deadline with 6 copies → All sections completed → Includes required signatures | | | |
| Need: 10 points → Uses current and relevant data to justify need → Provides clear justification of need for funds → Specifies data sources used | | | |
| Readiness: 10 points → Policies, resources, structures and other inputs for success → Team engagement → Supports that are in place | | | |
| Collaboration and coordination: 10 points → Internal coordination activities → External partnerships | | | |
| Program implementation and timeline: 30 points → Objectives written using SMART language/format → Addresses program requirements → Encompasses full two-year grant period | | | |
| Overcoming barriers: 20 points → Potential barriers described → Overcoming barriers | | | |
| Proposed program budget: 10 points → Budget items and costs are in line with objectives → Budget items reflect the first year of funding only (up to \$8,000) | | | |
| Total: (100 points possible) | | | |

**2010-2012 HIV Prevention Education Program
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Sample List of Potential Data Sources

There are numerous state and local sources of data that can be consulted for the purposes of this grant opportunity. The below list is provided simply to provide a starting point. This list is by no means exhaustive.

State and Local Data:

Vermont Agency of Human Services, [Community Profiles](#), 2007

Vermont Department of Health, [Youth Risk Behavior Survey](#), 2009

Vermont Department of Health, [STD Quarterly Report](#), 2007

Vermont Department of Education, [Free & Reduced Priced Meals Program Eligibility](#), 09/10

Vermont Department of Education, [Dropout and High School Completion Data](#), 08/09

U.S. Census Bureau, [Census 2000 Data for the State of Vermont](#)

Centers for Disease Control and Prevention, [Syphilis Profile for Vermont](#), 2008

Centers for Disease Control and Prevention, [Chlamydia Profile for Vermont](#), 2008

Writing SMART Objectives

What are SMART Objectives?

- An objective describes results to be achieved and how they will be achieved. Objectives are more immediate than goals; they represent mileposts to be achieved relevant to achieving corresponding goals.
- Because objectives detail program activities, multiple objectives are generally needed to address a single goal.
- Objectives are the basis for monitoring progress toward achieving program goals and setting targets for accountability

SMART Objectives are:

1. Specific:

- Objectives should provide the “who” and “what” of program activities.
- Use only one action verb since objectives with more than one verb imply that more than one activity or behavior is being measured.
- Avoid verbs that may have vague meanings to describe intended outcomes (e.g. “understand” or “know”) since it may prove difficult to measure them. Instead, use verbs that document action (e.g., “At the end of the session, the students will list three concerns...”)
- Remember, the greater the specificity, the greater the measurability.

2. Measurable:

- The focus is on “how much” change is expected. Objectives should quantify the amount of change expected. It is impossible to determine whether objectives have been met unless they can be measured.
- The objective provides a reference point from which a change in the target population can clearly be measured.

3. Achievable:

- Objectives should be attainable within a given time frame and with available program resources.

4. Realistic:

- Objectives are most useful when they accurately address the scope of the problem and programmatic steps that can be implemented within a specific time frame.
- Objectives that do not directly relate to the program goal will not help toward achieving the goal.

5. Time-phased:

- Objectives should provide a time frame indicating when the objective will be measured or a time by which the objective will be met.
- Including a time frame in the objectives helps in planning and evaluating the program.

CDC's School Health Education Resources (SHER) Characteristics of an Effective Health Education Curriculum

Reviews of effective programs and curricula and input from experts in the field of health education have identified the following characteristics of an effective health education curriculum¹⁻¹²:

- a. **Focuses on clear health goals and related behavioral outcomes.** Curricula have clear health-related goals and behavioral outcomes that are directly related to these goals. Instructional strategies and learning experiences are directly related to the behavioral outcomes.
- b. **Is research-based and theory-driven.** Instructional strategies and learning experiences build on theoretical approaches (for example, social cognitive theory and social inoculation theory) that have effectively influenced health-related behaviors among youth. The most promising curricula go beyond the cognitive level and address health determinants, social factors, attitudes, values, norms, and skills shown to influence specific health-related behaviors.
- c. **Addresses individual values and group norms that support health-enhancing behaviors.** Instructional strategies and learning experiences help students accurately assess the level of risk-taking behavior among their peers (for example, how many of their peers use illegal drugs), correct misperceptions of peer and social norms, and reinforce health-enhancing values and beliefs.
- d. **Focuses on increasing personal perceptions of risk and harmfulness of engaging in specific health risk behaviors and reinforcing protective factors.** Curricula provide opportunities for students to assess their vulnerability to health problems, actual risk of engaging in harmful health behaviors, and exposure to unhealthy situations. Curricula also provide opportunities for students to validate health enhancing beliefs, intentions, and behaviors.
- e. **Addresses social pressures and influences.** Curricula provide opportunities for students to address personal and social pressures to engage in risky behaviors, such as media influence, peer pressure, and social barriers.
- f. **Builds personal competence, social competence, and self efficacy by addressing skills.** Curricula build essential skills including communication, refusal, assessing accuracy of information, decision-making, planning and goal-setting, self-control, and self-management, that enable students to build personal confidence and ability to deal with social pressures and avoid or reduce risk behaviors. For each skill, students are guided through a series of developmental steps: Discussing the importance of the skill, its relevance, and relationship to other learned skills.
 1. Presenting steps for developing the skill.

2. Modeling the skill.
 3. Practicing and rehearsing the skill using real-life scenarios.
 4. Providing feedback and reinforcement.
- g. **Provides functional health knowledge that is basic, accurate, and directly contributes to health-promoting decisions and behaviors.** Curricula provide accurate, reliable, and credible information for usable purposes so that students can assess risk, correct misperceptions about social norms, identify ways to avoid or minimize risky situations, examine internal and external influences, make behaviorally-relevant decisions, and build personal and social competence. A curriculum that provides information for the sole purpose of improving knowledge of factual information is incomplete and inadequate.
- h. **Uses strategies designed to personalize information and engage students.** Curricula include instructional strategies and learning experiences that are student-centered, interactive, and experiential (for example, group discussions, cooperative learning, problem solving, role playing, and peer-led activities). Learning experiences correspond with students' cognitive and emotional development, help them personalize information, and maintain their interest and motivation while accommodating diverse capabilities and learning styles. Instructional strategies and learning experiences include methods for
1. Addressing key health-related concepts.
 2. Encouraging creative expression.
 3. Sharing personal thoughts, feelings, and opinions.
 4. Developing critical thinking skills.
- i. **Provides age-appropriate and developmentally-appropriate information, learning strategies, teaching methods, and materials.** Curricula address students' needs, interests, concerns, developmental and emotional maturity levels, experiences, and current knowledge and skill levels. Learning is relevant and applicable to students' daily lives. Concepts and skills are covered in a logical sequence.
- j. **Incorporates learning strategies, teaching methods, and materials that are culturally inclusive.** Curricular materials are free of culturally biased information, but also include information, activities, and examples that are inclusive of diverse cultures and lifestyles (such as gender, race, ethnicity, religion, age, physical/mental ability, and appearance). Strategies promote values, attitudes, and behaviors that acknowledge the cultural diversity of students; optimize relevance to students from multiple cultures in the school community; strengthen students' skills necessary to engage in intercultural interactions; and build on the cultural resources of families and communities.
- k. **Provides adequate time for instruction and learning.** Curricula provide enough time to promote understanding of key health concepts and practice skills. Affecting change requires an intensive and sustained effort. Short-term or "one shot" curricula, such as a few hours at one grade level, are generally insufficient to support the adoption and maintenance of healthy behaviors.

- l. **Provides opportunities to reinforce skills and positive health behaviors.** Curricula build on previously learned concepts and skills and provide opportunities to reinforce health–promoting skills across health content areas and grade levels. This could include incorporating more than one practice application of a skill, adding "skill booster" sessions at subsequent grade levels, or integrating skill application opportunities in other academic areas. Curricula that address age-appropriate determinants of behavior across grade levels and reinforce and build on learning are more likely to achieve longer–lasting results.
- m. **Provides opportunities to make positive connections with influential others.** Curricula link students to other influential persons who affirm and reinforce health–promoting norms, beliefs, and behaviors. Instructional strategies build on protective factors that promote healthy behaviors and enable students to avoid or reduce health risk behaviors by engaging peers, parents, families, and other positive adult role models in student learning.
- n. **Includes teacher information and plans for professional development and training that enhance effectiveness of instruction and student learning.** Curricula are implemented by teachers who have a personal interest in promoting positive health behaviors, believe in what they are teaching, are knowledgeable about the curriculum content, and are comfortable and skilled in implementing expected instructional strategies. Ongoing professional development and training is critical for helping teachers implement a new curriculum or implement strategies that require new skills in teaching or assessment.

References

1. Botvin GJ, Botvin EM, Ruchlin H. [School-Based Approaches to Drug Abuse Prevention: Evidence for Effectiveness and Suggestions for Determining Cost-Effectiveness](#) [pdf 85K]. In: Bukoski WJ, editor. *Cost-Benefit/Cost-Effectiveness Research of Drug Abuse Prevention: Implications for Programming and Policy*. NIDA Research Monograph, Washington, DC: U.S. Department of Health and Human Services, 1998;176:59–82.
2. Contento I, Balch GI, Bronner YL. Nutrition education for school-aged children. *Journal of Nutrition Education* 1995;27(6):298–311.
3. Eisen M, Pallitto C, Bradner C, Bolshun N. [Teen Risk-Taking: Promising Prevention Programs and Approaches*](#). Washington, DC: Urban Institute; 2000.
4. Gottfredson DC. School-Based Crime Prevention. In: Sherman LW, Gottfredson D, MacKenzie D, Eck J, Reuter P, Bushway S, editors. [Preventing Crime: What Works, What Doesn't, What's Promising*](#) [pdf 100K]. National Institute of Justice; 1998.
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7. Lytle L, Achterberg C. Changing the diet of America's children: What works and why? *Journal of Nutrition Education* 1995;27(5):250–60.
8. Nation M, Crusto C, Wandersman A, Kumpfer KL, Seybolt D, Morrissey-Kane, E, Davino K. What works: Principles of effective prevention programs. *American Psychologist* 2003;58(6/7):449–456.
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10. Sussman, S. Risk factors for and prevention of tobacco use. Review. *Pediatric Blood and Cancer* 2005;44:614–619.
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12. Weed SE, Ericksen I. *A Model for Influencing Adolescent Sexual Behavior*. Salt Lake City, UT: Institute for Research and Evaluation; 2005. Unpublished manuscript.

About CCSSO

The Council of Chief State School Officers (CCSSO) is a nonpartisan, nationwide, nonprofit organization of public officials who head departments of elementary and secondary education in the states, the District of Columbia, the Department of Defense Education Activity, and five U.S. extra-state jurisdictions. CCSSO provides leadership, advocacy, and technical assistance on major educational issues. The Council seeks member consensus on major educational issues and expresses their views to civic and professional organizations, federal agencies, Congress, and the public.

About SCASS

CCSSO created the State Collaborative on Assessment and Student Standards (SCASS) in 1991 to encourage and assist states in working collaboratively on assessment design and development across the curriculum.

About HEAP

The Health Education Assessment Project (HEAP) is a project of CCSSO-SCASS. The HEAP works to develop resources to help members align curriculum, instruction, and assessment in health education to improve student health literacy.



7/02/04

FACT SHEET

What Is the Health Education Assessment Project?

Ensuring that our nation's children acquire the knowledge and skills they need to maintain and enhance health... Changing the way teachers teach ... Fostering a standards-based system of health education that aligns curriculum, instruction, and assessment... These are the goals of the Health Education Assessment Project, or the HEAP, a consortium of program specialists in health education, health, and higher education.

Ensuring Health Literacy

While it's important for students to know health facts, it is essential that students acquire the skills they will need to handle real-life situations. In other words, students need to develop health literacy. That's why the HEAP uses the National Health Education Standards (NHES), which emphasize skill acquisition, as one of the foundations for all its work. In skills-based health education, students learn how to obtain, interpret, and understand basic health information and services. Through practice, students also develop the competence to use such information in ways that enhance health. For example, not only do students learn that tobacco is the number one cause of preventable disease in the United States, they also learn how advertising tries to influence their behavior; how to handle peer pressure; how to set realistic, health-enhancing goals; and how to manage stress. In addition to the NHES, the HEAP resources address the adolescent risk factors identified by the Centers for Disease Control and Prevention and traditional health education topics for a comprehensive approach to sequential, age-appropriate health education.

Changing the Way Teachers Teach

The HEAP resources and training activities support a paradigm shift in the way teachers teach. Applying a "backward" approach to teaching, the HEAP helps teachers use assessment to inform instruction. When teachers understand that standards-based assessment provides the framework for delivering appropriate health curriculum and instruction, they can then continuously adjust and improve instruction to ensure students develop—and apply—the knowledge and skills most likely to lead to lifelong healthy behaviors.

Measuring Achievement in Health Education

(An Overview of the SCASS~HEAP Web-Based Assessment System)

Overview: The Health Education Assessment Project Web-based Assessment System will be demonstrated to show how teachers can assess students' acquisition of health knowledge and skills "on line" to provide immediate feedback to students and help teachers analyze the data for instructional improvements. This has implications for SDFS's accountability requirements.

Information on the HEAP Web-based Assessment System:

The web-based SCASS-HEAP item bank contains nearly 1900 field-tested assessment items. In addition to searching and gathering items of interest for downloading, further editing, and printing, the item bank also includes test creation with online delivery and dynamic results analysis which can inform instruction.

In the demonstration that follows, the cycle of searching the bank, online test creation, test delivery, and viewing results is presented.

Assume the teacher wishes to create a formative assessment which assesses skills of decision making or analyzing influences with respect to alcohol and other drugs. In addition, the teacher is a middle school teacher and wishes to use multiple choice items for automatic scoring with online test delivery.

After logging into the web-based item bank, the search window is displayed. The search window allows teachers to browse the item bank contents and select terms for searching. Terms that are selected for searching are displayed in the right-side column. Note the term in the screen shot. This search request will return items in the bank classified as (Core concept: Alcohol and Other Drugs) and (Grade Level: Middle School) and (Item type: multiple choice and short answer) and (Skill: decision making and analyzing influences).

Source: Nancy Hudson, Coordinator, Health Education Assessment Project (HEAP)
Council of Chief State School Officers
Washington, D.C.

MetaCat Web Client - Mozilla Firefox

File Edit View Go Bookmarks Tools Help

http://www.metacat2.com/mc/main.jsp?page=collections.jsp Go

Customize Links Free Hotmail Windows Media Windows MetaCat Web Client Step1 Step1

User: heaptag | Home | No saved presentations | Work Window

SCASS-HEAP Item Bank

1894 field-tested health assessment items.
© 2000-2005 CCSSO-SCASS Health Assessment Project.

Text Search

Browse Search

Core Concept

Check Box(es) to Add Search Term(s)

- ☒ Alcohol and Other Drugs
- ☐ Community and Environmental Health
- ☐ Family Life And Sexuality
- ☐ Injury Prevention
- ☐ Mental Health

Selected Terms

Alcohol and Other Drugs [Core 2. Middle School (Grade Level)]
1. Multiple Choice [Item Type]
2. Short Answer [Item Type]
Goal Setting [Skill]
Decision Making [Skill]
Analyzing Influences [Skill]

Search Type? ☒ Smart ☐ And

The results of the search request are displayed in the "table view", as shown in the screen shot below: Each item is a row in the table. It can be seen that there were 12 items that met the teachers search request. The screen shot also demonstrates a pull-down menu of a variety of functions available to assist in examining the items. Data displayed in the table view can be customized by the teacher using the "customize" function.

http://www.metacat2.com - Mozilla Firefox

12 results for: SMART - Alcohol and Other Drugs [Core Concept], 2. Middle School [Grade Level]

Items: 1 - 12 Go

table items gallery slide

| | <input type="checkbox"/> Select All | Item# | ModuleID | Core Concept | Skill | Grade | Actions |
|----|-------------------------------------|-----------------------|----------|--------------------|--------------------|------------------|-------------------------|
| 1 | <input type="checkbox"/> | 20004 | 200 | Alcohol and Oth... | Decision Making | 2. Middle School | Sort |
| 2 | <input type="checkbox"/> | 20009 | 200 | Alcohol and Oth... | Decision Making | 2. Middle School | Customize |
| 3 | <input type="checkbox"/> | 20106 | 201 | Alcohol and Oth... | Decision Making | 2. Middle School | Printable View |
| 4 | <input type="checkbox"/> | 20305 | 203 | Alcohol and Oth... | Decision Making | 2. Middle School | Open selected as... |
| 5 | <input type="checkbox"/> | 20307 | 203 | Alcohol and Oth... | Decision Making | 2. Middle School | Test in Browser |
| 6 | <input type="checkbox"/> | 20310 | 203 | Alcohol and Oth... | Decision Making | 2. Middle School | Score Guide in Browser |
| 7 | <input type="checkbox"/> | 20401 | 204 | Alcohol and Oth... | Analyzing Influ... | 2. Middle School | Test in Word 98+ |
| 8 | <input type="checkbox"/> | 20402 | 204 | Alcohol and Oth... | Decision Making | 2. Middle School | Score Guide in Word 98+ |
| 9 | <input type="checkbox"/> | 20406 | 204 | Alcohol and Oth... | Analyzing Influ... | 2. Middle School | Item Analysis |
| 10 | <input type="checkbox"/> | 20408 | 204 | Alcohol and Oth... | Analyzing Influ... | 2. Middle School | Get Details |
| 11 | <input type="checkbox"/> | 20409 | 204 | Alcohol and Oth... | Analyzing Influ... | 2. Middle School | Save selected to... |
| 12 | <input type="checkbox"/> | 20410 | 204 | Alcohol and Oth... | Analyzing Influ... | 2. Middle School | Work Window |

Done

Items can be viewed a number of way. In the next shot, the slide view is shown. The slide view displays items one at a time, with descriptive data in the left column.

12 results for: SMART - Alcohol and Other Drugs [Core Concept], 2. Middle School [Grade Level]

Items: 1 - 12 Go

table items gallery slide

Actions

Item#
20310

ModuleID
203

Core Concept
Alcohol and Other Drugs

Skill
Decision Making

Grade Level
2. Middle School

Item Type
2. Short Answer

Rubric
[CC Rubric](#)
[Skill Rubric](#)
[Scoring Criteria](#)

Practice Scoring Key
203PracticeSetKey.pdf

CC_N
195.0

CC_Mean
1.92

CC_Distribution
1=33%, 2=46%, 3=16%, 4=5%

6 of 12

☒ Select

203 - Healthy Choices about AOD Use

Tony and Mario have been best friends since elementary school. One day as they are walking home from school, Tony pulls a marijuana cigarette out his backpack and offers to share it with Mario. Mario knows he should not smoke marijuana, but he's not sure how to respond. He has several options:

- He could smoke the marijuana with Tony but promise himself never to smoke marijuana again.
- He could refuse to smoke the marijuana but let Tony smoke it by himself.
- He could refuse to smoke the marijuana and try to persuade Tony not to smoke it either.

For each of these options, describe a health-related consequence for Mario, either positive or negative. Then decide which of the three options is the most healthful and tell why you chose it.

6 of 12

Done




Items of interest can be selected and saved to a "work window" while performing other searches. The work window can be thought of as the "shopping cart" for items. However, the work window provides many functions for test creation. Assume for this demonstration, that the items returned in the search will satisfy the assessment needs. The teacher wishes to move all items to the "work window".

The "Select All" box is checked, and all items are selected. Next the folder icon is clicked to add selected items to the work window.

http://www.metacat2.com - Mozilla Firefox

12 results for: SMART - Alcohol and Other Drugs [Core Concept], 2. Middle School [Grade Level]

Items:

| | <input checked="" type="checkbox"/> Select All | Item# | ModuleID | Core Concept | Skill | 2. Middle School... | 1. Multiple Ch |
|----|--|-----------------------|----------|--------------------|-------------------|---------------------|----------------|
| 1 | <input checked="" type="checkbox"/> | 20004 | 200 | Alcohol and Oth... | Decision Making | 2. Middle Schoo... | 1. Multiple Ch |
| 2 | <input checked="" type="checkbox"/> | 20106 | 201 | Alcohol and Oth... | Decision Making | 2. Middle Schoo... | 1. Multiple Ch |
| 3 | <input checked="" type="checkbox"/> | 20305 | 203 | Alcohol and Oth... | Decision Making | 2. Middle Schoo... | 1. Multiple Ch |
| 4 | <input checked="" type="checkbox"/> | 20307 | 203 | Alcohol and Oth... | Decision Making | 2. Middle Schoo... | 1. Multiple Ch |
| 5 | <input checked="" type="checkbox"/> | 20401 | 204 | Alcohol and Oth... | Analyzing Infl... | 2. Middle Schoo... | 1. Multiple Ch |
| 6 | <input checked="" type="checkbox"/> | 20402 | 204 | Alcohol and Oth... | Decision Making | 2. Middle Schoo... | 1. Multiple Ch |
| 7 | <input checked="" type="checkbox"/> | 20406 | 204 | Alcohol and Oth... | Analyzing Infl... | 2. Middle Schoo... | 1. Multiple Ch |
| 8 | <input checked="" type="checkbox"/> | 20408 | 204 | Alcohol and Oth... | Analyzing Infl... | 2. Middle Schoo... | 1. Multiple Ch |
| 9 | <input checked="" type="checkbox"/> | 20009 | 200 | Alcohol and Oth... | Decision Making | 2. Middle Schoo... | 2. Short Answ |
| 10 | <input checked="" type="checkbox"/> | 20310 | 203 | Alcohol and Oth... | Decision Making | 2. Middle Schoo... | 2. Short Answ |
| 11 | <input checked="" type="checkbox"/> | 20409 | 204 | Alcohol and Oth... | Analyzing Infl... | 2. Middle Schoo... | 2. Short Answ |
| 12 | <input checked="" type="checkbox"/> | 20410 | 204 | Alcohol and Oth... | Analyzing Infl... | 2. Middle Schoo... | 2. Short Answ |

http://www.metacat2.com/mc/table.jsp?source=sr&slide=11&presId=-1&searchtype=0&view=table#



The work window, shown below, now contains these 12 items. The teacher chooses to run an "item analysis" on the items, which allows the items to be summarized by any available data, such as content or skills.

Work Window

To save work window items to a new presentation, enter a title and click "Save"

Title:

12 items in work window

| table | | items | | gallery | | slide | |   | | Actions | |
|-------|-------------------------------------|-----------------------|----------|--------------------|-------------------|--------------------|---|---|--------------------|---------|--|
| | <input type="checkbox"/> Select All | Item# | ModuleID | Core Concept | Skill | Grade Level | Actions | | | | |
| 1 | <input type="checkbox"/> | 20004 | 200 | Alcohol and Oth... | Decision Making | 2. Middle S | Sort Customize Printable View | | | | |
| 2 | <input type="checkbox"/> | 20106 | 201 | Alcohol and Oth... | Decision Making | 2. Middle S | Open selected as... Test in Browser Score Guide in Browser Test in Word 98+ Score Guide in Word 98+ | | | | |
| 3 | <input type="checkbox"/> | 20305 | 203 | Alcohol and Oth... | Decision Making | 2. Middle S | | | | | |
| 4 | <input type="checkbox"/> | 20307 | 203 | Alcohol and Oth... | Decision Making | 2. Middle S | | | | | |
| 5 | <input type="checkbox"/> | 20401 | 204 | Alcohol and Oth... | Analyzing Infl... | 2. Middle S | | | | | |
| 6 | <input type="checkbox"/> | 20402 | 204 | Alcohol and Oth... | Decision Making | 2. Middle S | Remove Selected Items | | | | |
| 7 | <input type="checkbox"/> | 20406 | 204 | Alcohol and Oth... | Analyzing Infl... | 2. Middle S | Item Analysis | | | | |
| 8 | <input type="checkbox"/> | 20408 | 204 | Alcohol and Oth... | Analyzing Infl... | 2. Middle Schoo... | | | 1. Multiple Cho... | | |
| 9 | <input type="checkbox"/> | 20009 | 200 | Alcohol and Oth... | Decision Making | 2. Middle Schoo... | | | 2. Short Answer | | |
| 10 | <input type="checkbox"/> | 20310 | 203 | Alcohol and Oth... | Decision Making | 2. Middle Schoo... | | | 2. Short Answer | | |
| 11 | <input type="checkbox"/> | 20409 | 204 | Alcohol and Oth... | Analyzing Infl... | 2. Middle Schoo... | | | 2. Short Answer | | |
| 12 | <input type="checkbox"/> | 20410 | 204 | Alcohol and Oth... | Analyzing Infl... | 2. Middle Schoo... | | | 2. Short Answer | | |

Done

The item analysis, shown below by skill, gives an indication of the number, type, and difficulty of the items in each skill. This feature can be used to add/delete items as necessary to get the desired balance.

Analysis by Skill

Analyzing Influences

| | Item# | Item Text | Item Type | Difficulty |
|--|-------|---|--------------------|------------|
| | 20401 | A person would be more likely to say "no" to using drugs if he or she: | 1. Multiple Choice | 0.73 |
| | 20406 | Some people feel it is hard to choose not to drink alcohol. Which of the following would make it difficult to decide to avoid drinking? | 1. Multiple Choice | 0.73 |

Decision Making

| | Item# | Item Text | Item Type | Difficulty |
|--|-------|--|--------------------|------------|
| | 20004 | Jake is at a party at Mark's house when he sees two guys smoking marijuana. Mark has gone to the store to buy more soda, but his parents are upstairs watching television. Considering the potential consequences of the situation, what is the most responsible thing for Jake to do? | 1. Multiple Choice | 0.6 |
| | 20106 | Which of the following would be LEAST important to consider when deciding whether to use alcohol? | 1. Multiple Choice | 0.78 |

Done

When the teacher is satisfied with the items chosen, they can be saved from the Work Window. In this demonstration, the teacher calls this group of items the "AOD Test". Saved items can be retrieved and edited further as needed, but once saved, they are available for online assessment if desired. Appropriate permissions must be assigned by the teacher.

Work Window

To save work window items to a new presentation, enter a title and click "Save"

Title:

7 items in work window

| | | | | | | | | | |
|-------|---|-----------------------|----------|--------------------|-------------------|--------------------|-----------------|--|--|
| table | | items | | gallery | | slide | | <div><div><div></div><div></div></div></div> Actions | |
| | <div><div></div><div>Select All</div></div> | Item# | ModuleID | Core Concept | Skill | Grade Level | Item Type | | |
| 1 | <div><div></div></div> | 20004 | 200 | Alcohol and Oth... | Decision Making | 2. Middle Schoo... | 1. Multiple Cho | | |
| 2 | <div><div></div></div> | 20106 | 201 | Alcohol and Oth... | Decision Making | 2. Middle Schoo... | 1. Multiple Cho | | |
| 3 | <div><div></div></div> | 20305 | 203 | Alcohol and Oth... | Decision Making | 2. Middle Schoo... | 1. Multiple Cho | | |
| 4 | <div><div></div></div> | 20307 | 203 | Alcohol and Oth... | Decision Making | 2. Middle Schoo... | 1. Multiple Cho | | |
| 5 | <div><div></div></div> | 20401 | 204 | Alcohol and Oth... | Analyzing Infl... | 2. Middle Schoo... | 1. Multiple Cho | | |
| 6 | <div><div></div></div> | 20402 | 204 | Alcohol and Oth... | Decision Making | 2. Middle Schoo... | 1. Multiple Cho | | |
| 7 | <div><div></div></div> | 20406 | 204 | Alcohol and Oth... | Analyzing Infl... | 2. Middle Schoo... | 1. Multiple Cho | | |

Assuming a student with username and password, and permission to take the test logs into the test-taking component of the item bank, they will be able to see the online test..

MetaCat - Mozilla Firefox

File Edit View Go Bookmarks Tools Help

http://scassheap.org/pres/play

Customize Links Free Hotmail Windows Media Windows MetaCat Web Client Step1 >>

User: heaptag [Home](#) | [Logout](#) | [Help](#)

Welcome

☐ Presentation
[AOD Test](#)

The next screen shows a couple of the items displayed in test-taking mode

MetaCat - AOD Test - Records - Mozilla Firefox

File Edit View Go Bookmarks Tools Help

http://scassheap.org/pres/records.jsp?pres=190 Go

Customize Links Free Hotmail Windows Media Windows MetaCat Web Client Step1 Step1

User: heaptag [Home](#) | [Logout](#) | [Help](#)

AOD Test

[Info](#) | [Play](#) | [Items](#) | [My Status](#) | [Reports](#)

1. 200 - Short-Term and Long-Term Effects of AOD Use

Jake is at a party at Mark's house when he sees two guys smoking marijuana. Mark has gone to the store to buy more soda, but his parents are upstairs watching television. Considering the potential consequences of the situation, what is the most responsible thing for Jake to do?

- ☐ A. Tell Mark's parents about the situation
- ☐ B. Join the guys smoking marijuana
- ☐ C. Wait for Mark to come back and tell him about the situation
- ☐ D. Tell the guys to stop smoking marijuana

2. 201 - Communicating Healthy Choices about AOD Use

Which of the following would be LEAST important to consider when deciding whether to use alcohol?

- ☐ A. What are the health risks?
- ☐ B. Will I seem more sophisticated?
- ☐ C. What are my long-term goals?
- ☐ D. What factors have caused me to think about using alcohol?

Done

Once finished, if permission assigned to view results, the test-taker can see how they performed. Total score and results summaries are included at the top of the page.

MetaCat - Quiz answers - Mozilla Firefox


File Edit View Go Bookmarks Tools Help

http://scassheap.org/pres/answers.jsp?pres=190

Customize Links Free Hotmail Windows Media Windows MetaCat Web Client Step1 Step1


2. Which of the following would be LEAST important to consider when deciding whether to use alcohol?

A. What are the health risks?
B. Will I seem more sophisticated?
C. What are my long-term goals?
D. What factors have caused me to think about using alcohol?

 **Correct** You answered: B Correct answer: B [View slide](#)

3. Jin, who has just moved to a new school, has been invited to a party where he knows other students will be drinking. Given the potential consequences of each of the following actions, the most healthful thing Jin could do is:

A. take a date to the party.
B. ask some friends from his old school to go to the party with him.
C. not go to the party.
D. only go to the party if his new friends are going.

 **Incorrect** You answered: B Correct answer: C [View slide](#)

Finally, the teacher (with appropriate permissions) can view the results immediately. A variety of options are available for analysis, such as both summary and item -level details further broken down by any available student demographic. In the screen shot below, the test has been summarized by skill, and data broken down by gender. In the demonstration only females took the test.

AOD Test - Summarization

Summarize by: ☐ Show Details

AOD Test **Average Score: 71.43%**

Scores by Skill

Analyzing Influences

Average Score: 100.0%
female Average Score: 100.0%

Decision Making

Average Score: 60.0%
female Average Score: 60.0%

Teachers can view the results of their students' test by a variety of factors to help them analyze their instructional practices to support instructional improvement and higher levels of learning for all students. In the case of SDFS requirements, districts and states can use the on-line testing system to analyze pre/post test results to show an increase in students' knowledge and skills of students on SDFS topics.